CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received
Official Use Only

COVER PAGE

Ple	ase type or print in ink.						
NAME OF FILER (LAST) (FIRST)		IRST)		ZULUMAI	CZY A (MIDDLE) 34	All majors and the Beating Change	
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1.	Office, Agency, or Court			3241 E:	· UU HUEN VAHRA REPOURCES		
	Agency Name (Do not use acronyms)				200 - \$2 day - 1 day - 100 - 1		
	Department of Conservation						
	Division, Board, Department, District, if applicable		Your Position				
	Division of Oil, Gas, and Geothermal Resources	3	Engineerir	ng Geologist			
	▶ If filing for multiple positions, list below or on an attachment	t. (Do not use	acronyms)				
	Agency:		_ Position:				
2.	2. Jurisdiction of Office (Check at least one box)						
	▼ State		☐ Judge or Co	ourt Commissioner (Sta	tewide Jurisdiction)		
	Multi-County		County of _				
	City of						
3.	Type of Statement (Check at least one box)						
	Annual: The period covered is January 1, 2017, through December 31, 2017.		Leaving O (Check one	office: Date Lefte)	1		
	The period covered is/	, through			y 1, 2017, through the da	ate of	
	Assuming Office: Date assumed//			riod covered is	/, th	rough	
	Candidate: Date of Election and	office sought,	if different than Part	1:			
4.	1. Schedule Summary (must complete) ► Total number of pages including this cover page:2						
	Schedules attached			•			
	★ Schedule A-1 - Investments – schedule attached		Schedule C - Incom	me, Loans, & Business	Positions – schedule at	ttached	
	Schedule A-2 - Investments - schedule attached		Schedule D - Incom	me – Gifts – schedule	attached		
	Schedule B - Real Property - schedule attached		Schedule E - Incor	me – Gifts – Travel Pa	yments – schedule attac	hed	
_=(□ None - No reportable interests on any schedul	le					
5.	Verification	erden kriste betreen op gan in den groot gan	and the state of t			નુંતુક કરાવો મેન્સ્ટર્સિક્ટ ન _િ ર્સ કરોલ કરોલ કરો	
	MAILING ADDRESS STREET	CITY		STATE	ZIP CODE		
	(Business or Agency Address Recommended - Public Document) 251 Baylands Drive	Martine	\ -	CA	0.4550		
	DAYTIME TELEPHONE NUMBER	iviai urie	E-MAIL ADDRESS	CA	84553		
	(925) 270-5828		Guy.Jett@cons	servation.ca.gov			
	nave used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained erein and in any attached schedules is true and complete. I acknowledge this is a public document.						
		ertify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.					
	Date Signed 2018-Mar-29	Si	ignature <u>Luy</u>	gett-			
-	(month, day, year)	. 80g. jari Mayer Masar sansaran	()	(File)the originally signed statem	ent with your filing official.)		

SCHEDULE A-1 Investments

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Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

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Name				

► NAME OF BUSINESS ENTITY LPL Financial	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Managed Investment Fund	
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 Over \$1,000,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT 401(k) Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//_17	///
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE \$2,000 - \$10,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
// 17/ 17 ACQUIRED DISPOSED	//
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE \$2,000 - \$10,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
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Comments: _